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maintenance fee notifica		nerwise in Block I, by (a	a) specifying a new corres	spondence address;	and/or (b) indicating a sepa	ITAIC PEE ADDRESS IOF
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
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FLORHAM PARK, NJ 07932				smitted to the USP.	s Fee(s) Transmittal is being ith sufficient postage for fire Stop ISSUE FEB address TO (571) 273-2885, on the d	ate indicated below.
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/771,640	10/771,640 02/04/2004		James Ferguson White		4736A	3706
TITLE OF INVENTION: CATALYST FOR PURIFICATION OF AROMATIC ACIDS						
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV, PAID ISSUI	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	08/04/2009
EXAM	INER	ART UNIT	CLASS-SUBCLASS			
OH, TAYLOR V		1625	562-486000			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,			
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSI			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
BASE CATALYSTS LLC FLORHAM PARK, NEW JERSEY						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖼 corporation or other private group entity 🗀 Government						
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
Issue Fee			A check is enclosed.			
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5. Change in Entity Sta	itus (from status indicate		b. Applicant is no lon	ger claiming SMAI	L ENTITY status. See 37 C	FR 1.27(g)(2).
NOTE: The Issue Fee an	d Publication Fee (If req	uired) will not be accepte	d from anyone other than t	he applicant; a regi	stered attorney or agent; or th	ne assignee or other party in
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Authorized Signature Date Date						
Typed or printed name <u>Kaymond I Keller</u> Registration No. <u>Joyna Description</u> Registration No. <u>Joyna De</u>						
an application. Confider submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	tiality is governed by 35 d application form to the ions for reducing this bu /irginia 22313-1450. DO 813-1450.	i U.S.C. 122 and 37 CFR c USPTO. Time will vary uden, should be sent to the NOT SEND FEES OR	1,14. This collection is est y depending upon the individe Chief Information Office COMPLETED FORMS TO	timated to take 12 r ridual case. Any co er, U.S. Patent and O THIS ADDRESS	he public which is to file (and innutes to complete, includir imments on the amount of titrademark Office, U.S. Dept. SEND TO: Commissioner displays a valid OMB control	ng gathering, preparing, and me you require to complete artment of Conmerce, P.O. for Patents, P.O. Box 1450,
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